

POSITION

INITIALS

ID NO.

DATE

12/11/00

FEE DETERMINATION

O.I.P.E. CLASSIFIER

FORMALITY REVIEW

RESPONSE FORMALITY REVIEW

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	4-10-16-02	
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10	✓	1-01-27-03	
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12	✓		
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48	✓		
49	✓		
50	✓		

Claim	Final	Original	Date
51	✓	5-10-16-02	
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56	✓		
57	✓		
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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